REAS

DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES DIVISION OF ENVIRONMENTAL HEALTH CHILD CARE FACILITY

The state of the s				INSI	PECTION REPORT			
REASON		GRADE	Inspection Date:		ESTABLISHMENT NAME:	This issum In	n moba palan na	d mail I
Regular	/		6/12/1	7	SAGAN FIN'NA'GU	VEN FIN	O CHAMORU	DAY CARI
REASON GRADE Inspection Date: ES Regular 6/12/17 Follow-Up 2:15pm 2:45pn LO Other: A Sanitary Permit No.:	OWNER/OPERATOR: ,							
Complaint	mplaint Time In/Out: OWNER/OPERATOR: SAGAN FIN'NA'G estigation RATING 2:45n LOCATION:	DUEN CHAMORU						
Investigation		RATING	7.10pm	7. John	LOCATION:	Establis	shment Type:	ungha
		Λ	Sanitary P	ermit No.;	060800	CC	- /NUP-512	RY
		B	20000-1000556		PERMIT STATUS:	alid	Temporary	Expired
No. of Children:	9	Male 17	Female 2	Total	Child Care License: No.: 15005	3 HValid	/ / Provisional /	/ Expired

The following items identify violations found this day in the operations and facilities which must be corrected by the next inspection or sooner as the Department indicates. Non-compliance may result in downgrading or permit suspension. To appeal a written request for hearing must be submitted before the indicated correction date.

ITEM*	REMARKS	DEMERIT	CORRECT BY
	A REGULAR INSPECTION WAS CONDUCTED, PREVIOUS	יום סככונו	APTIDATA
	INSPECTION CONDUCTED ON \$ 3/9/17 (6, A)	né nogon to	Adograc
	ITEM # 24 FROM PREVIOUS INSPECTION HAS BEEN	THE CHARLE	
	CORRECTED	Hiblyoto scor	miningii2
	THE FULLOWING WAS OBSERVED:	oldetayo s	and Inna 2 Oc
#17	DOUR NEAR STORAGE AREA OBSTERVED TO HAVE	2	7/12/17
	HOLES, ALL EQUIPMENT SHALL BE LEFT IN	my one buil	hilot enO
	COUD REPAIR TO PREVENT PHYSICAL HAZARDS	THE THEFT	OF HOREOW
	opia martanjali, taouasaming no uso of state and succession of consta		DIO HARRY
	"A" PLACARD No. 02319 1554ED		and only of
- 5	BRIEFED PIC JULIA MANIBUSAN ON ABOVIE	- Y24	WATER SUP
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-8	Part Committee to the Committee of the C	pami un	AS MALIOTIV
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-	tagate a visylatila sinta	no nicilm ben	madental.
	re read and understand the above violation(s) and I am aware of the corrective m		ngettorit

I have read and understand the above violation(s) and I am aware of the corrective measures to be taken.

*Note: When any of the following items are cited above, they shall be corrected within

10 days of this inspection:

(2), (4), (6), (14), (21), (23), (24), (27), (28), (39) & (40).

Received By (Name & Title):

Manha Son

DEH Inspector (Name & Title):